

2810

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	71534	10/16/00
O.I.P.E. CLASSIFIER			8/23/00
FORMALITY REVIEW	<del>AW</del>	334	
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

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✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) ..... Canceled  
÷ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Final	Original	Date
1	✓	10/16/00	
2	✓	10/16/00	
3	✓	10/16/00	
4	✓	10/16/00	
5	✓	10/16/00	
6	✓	10/16/00	
7	✓	10/16/00	
8	✓	10/16/00	
9	✓	10/16/00	
10	✓	10/16/00	
11	✓	10/16/00	
12	✓	10/16/00	
13	✓	10/16/00	
14	✓	10/16/00	
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25	✓	10/16/00	
26	✓	10/16/00	
27	✓	10/16/00	
28	✓	10/16/00	
29	✓	10/16/00	
30	✓	10/16/00	
31	✓	10/16/00	
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47	✓	10/16/00	
48	✓	10/16/00	
49	✓	10/16/00	
50	✓	10/16/00	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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